

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

(Schedule E)

PAGE 1 OF 1
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Congressional Leadership Fund			FEC IDENTIFICATION NUMBER ▼ C C00504530		
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y					
Full Name of Payee Gridiron Communications			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 11 / 03 / 2016		
Mailing Address 3903 Portage Road, Suite C #262			Amount 21057.12		
City State Zip Code South Bend IN 46628		Transaction ID : 001 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2016			
Purpose of Expenditure Direct Mail		Category/ Type 004			
Name of Federal Candidate Carroll, Morgan, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>06</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>CO</u>		
Calendar Year-To-Date Per Election for Office Sought 1401118.50			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Push Digital			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 11 / 03 / 2016		
Mailing Address PO Box 21892			Amount 60000.00		
City State Zip Code Charleston SC 29413		Transaction ID : 002 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 11 / 03 / 2016			
Purpose of Expenditure Media placement		Category/ Type 004			
Name of Federal Candidate Carroll, Morgan, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>06</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>CO</u>		
Calendar Year-To-Date Per Election for Office Sought 1461118.50			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			81057.12		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶			81057.12		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Crosby, Caleb, , ,</u> <div style="text-align: right;">[Electronically Filed]</div>			Date M M M / D D D / Y Y Y Y Y Y 11 / 04 / 2016		